FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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SEC US	E ONLY
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DATE RE	CEIVED
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Name of Offering (Check if this is an ame	ndment and name has changed, and indicate change.)	RECEIVED TO
Filing Under (Check box(es) that apply): [Type of Filing: Y New Filing Amende	Rule 504 Rule 505 Rule 506 Section 4(6)	
	A. BASIC IDENTIFICATION DATA	1000 1100 200
. Enter the information requested about the i	Ssuer	
	nent and name has changed, and indicate change.)	185/69
EVOS USA, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
609 South Howard Ave., Tampa, FL 3360	6	
Address of Principal Business Operations if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
EVOS USA is a franchisor of healthier fac	t food restaurants.	PDACECCE
	mited partnership, to be formed	lease specify): NOV 1 0 2004
Actual or Estimated Date of Incorporation or Or Jurisdiction of Incorporation or Organization: (Month Year ganization: 0 4 0 4 Actual Estin Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	,	
774(6). When To File: A notice must be filed no later t and Exchange Commission (SEC) on the earlier	securities in reliance on an exemption under Regulation D of han 15 days after the first sale of securities in the offering, of the date it is received by the SEC at the address given be	A notice is deemed filed with the U.S. Securities
	ited States registered or certified mail to that address.	e 40
——————————————————————————————————————	Commission, 450 Fifth Street, N.W., Washington, D.C. 20: must be filed with the SEC, jone of which must be manually retyped or printed signatures.	
information Required: A new filing must conta	in all information requested. Amendments need only reportant material changes from the information previously supplied	rt the name of the issuer and offering, any changes fied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fce.		
ULOE and that have adopted this form. Issue are to be, or have been made. If a state require	n the Uniform Limited Offering Exemption (ULOE) for s rs relying on ULOE must file a separate notice with the S res the payment of a fee as a precondition to the claim fo ed in the appropriate states in accordance with state law.	securities Administrator in each state where sales r the exemption, a fee in the proper amount shal
_	ATTENTION	
Fallure to file notice in the appropria appropriate federal notice will not re- filing of a federal notice.	te states will not result in a loss of the federal estate exemption units in a loss of an available state exemption units	xemption. Conversely, failure to file the eas such exemption is predictated on the
Persons who re SEC 1972 (6-02) required to resp	spond to the collection of information contained bond unless the form displays a currently valid ON	In this form are not 18 control number. 1 of 9

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2. Enter the information re	equested for the fol	lowin	E.						
Each promoter of it.	the issuer, if the is:	suer h	as been organized w	rithin :	the past five years;				
 Each beneficial ow 	ner having the pow	er to v	vote or dispose, or di	rect th	e vote or disposition	of, 10	% or more o	fa clas	s of equity securities of the issuer.
 Each executive off 	loer and director o	fcorp	orate issuers and of	corpo	rate general and mar	aging	parmers of	partne	ership issuers; and
 Each general and t 	nanaging partner o	f part	nership issuers.	i					
Check Box(es) that Apply:	Promoter	2	Beneficial Owner	2	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Crassas, Alkis	f individual)								
Business or Residence Addre 609 South Howard Ave.,			t, City, State, Zip Co	ode)		· · · · ·			
Check Box(cs) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Lambridis, Konstantine									
Business or Residence Addre	ss (Number and	Street	t, City, State, Zip Co	ode)	 				
609 South Howard Ave., '	•	6		. •					
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner	2	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Jeffers, Michael	f individual)			i					The second secon
Business or Residence Addre	ss (Number and	Street	t, City, State, Zip Co	ode)					***************************************
609 South Howard Ave.,	Tampa, FL 3360	6							
Check Box(cs) that Apply:	Promoter		Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)						***************************************		
Diamond, Darrough									
Business or Residence Addre	ss (Number and	Street	t, City, State, Zip Co	ode)			***************************************		· · · · · · · · · · · · · · · · · · ·
609 South Howard Ave.,	Tampa, FL 336	06							
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	f individual)		·				· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ss (Number and	Stree	t, City, State, Zip Co	ode)				-,	
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	f individual)								
Business or Residence Addre	ss (Number and	Stree	t, City, State, Zip Co	ode)	* 	,			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ö	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first.	if individual)								
Business or Residence Addre	ess (Number and	Stree	t, City, State, Zip C	ode)			····		
	(Usc bla	nk sh	eet, or copy and use	eddit	ional copics of this s	heet,	as necessar)	<i>i</i>)	

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1.	Has the	icener sol	d, or does t									. 🗖	
•	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?										40	000 00	
4,												000.00	
3. Does the offering permit joint ownership of a single unit?									Yes	No 📮			
4. Enter the information requested for each porson who has been or will be paid or given, directly or indirectly as									inerty an	~~	₩		
	tommis If a pers	ision or sin ion to be lis s, list the n	ilar routune ted is an ass sinc of the h you may s	ration for s sociated pe roker or di	iolicization 1800 ar ago saler. If tru	of purchase out of a brok ore than five	ers in comp er or donic e (5) person	oction with It registered as to be list	sales of sed d with the f	curities in t	he offering		
Full N/A	Name (fient, if ind										
Busi	nest or	Residence	Address (N	number son	Street, C	ity, State, Z	ip Code)						
Nanc	c of As	sociated B	okor or De	aler					•				
Stati	es ha Wh	ich Person	Listed Has	Solicited	or intends	to Solicit i	Perchaetta	· · · · · · · · · · · · · · · · · · ·					
	(Check	"All States	or check	individual	Staces)		***********	-	*************		اد اطابات دخادهم بسدنه	II AI	States
	[AL]	[AK]	[ĀZ]	[AR]	CA	(CO)	CI	DE	[DC]		GA	(HI)	(185)
			CA	(K8)	KY	ILA	ME	MD	MX	M	MN	DMS)	MO
	M	DE	EY	MH		NX	NY	NC	ND	DH	OK)	OR	PA
		(SC)	SD	TN	CXXI		(VT)	(VA)	WA	WV	WI	WY	PR]
			first, if tod									****	
R/ne1	ness of	Kesidence	Address (1	VILLIONE RO	a sanset, C	ity, State, 2	cip Code)						
Neg	c of As	sociated Bi	roker or De	eler			· · · · · · · · · · · · · · · · · · ·				<u> </u>	4- 	
State	es in Wi	ich Person	Listed He	Solicited	or intends	to Solicit	Purchesers			**************************************			
			e, ot speek										States
		AK IN		(KS)	CA KY		(CT)	MODE)	DC MA	MU	(GA) (MN)		MOI
	MT	NE	1300 I	NA	M	NM	NY	RC)	190	OH	OK	OR	FA
	RI	(SC)	SD	TN	(TX)	mi	M	VA	WA	WY	(TWE)	WY	PR
Pull	Name (Last name	first, if indi	ividual)			· · · · · · · · · · · · · · · · · · ·						
Bus	iness or	Residence	Address (Vumber an	d Street, C	ity, State,	Cip Code)	· · · · · · · · · · · · · · · · · · ·					
Nam	e of As	sociated 8:	ober or De	aler									
State	es in Wi	ich Person	Listed Ha	Solicited	or Intende	to Solicit	Purchasers						
	(Check	"All State:	or check	individual	States)				con orbitant are at a	1 4	and harden statement and statement of the statement of th		States
	AL	AK	AZ	AR	CA	CO	CT	DE	(DC)	E	(GA)		
		(D)	DA	(KS)		NA NA	(SPO)	NC)	(ND)	OHU		MB OR	EA)
	IMT RL	(SC)	(512)	TR		UT		YA	CVA	(VY)			PR
,		*****		(Use blaz	k sheet, or	copy and m	e additions	al copies of	this sheet,	88 thecosian	y.)	**************************************	
							3 0/9						

	sold. Enter "0" if the enswer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Price	Amount Alassiy Sold
		-	U-1-40
	Delta accompletationes proprietation proprietation of the section		\$
	Equity, and the second sec	1,000,000.00	<u>s 1,000,000.00</u>
	Common [] Preferred		
	Convertible Securities (including wereasts)		
	Ратегий проток		\$
	Other (Specify	4 000 000	\$
	Total	7,000,000.00	\$ 1,000,000,00
	Answer also in Appendix, Column 3, if filing under ULOB.		
2.	Enter the number of socredited and non-secredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	s 1,000,000.00
			•
	Non-accredited in vertors		\$
			\$ 1,000,000.00
	Total (for filings ander Rule 504 only)		·
€.		3	·
3.	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 305, anter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twolve (12) months prior to the	3	<u>\$ 1,000,000.00</u>
€.	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, actor the information requested for all securities sold by the Issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505	Type of Security	\$ 1,000,000.00 Dollar America
э.	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, anter the information requested for all securities sold by the Issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A	Type of Becutity	Dollar Amount
€.	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, actor the information requested for all securities sold by the Issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505	Type of Becutity	\$ 1,000,000.00 Dollar Amount Sold \$ \$ \$ 1,000,000.00
э.	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, anter the information requested for all securities sold by the Issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A	Type of Becurity	Dollar Amount Sold \$
3. 4	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, anter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 304 Total a. Purplish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude anounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is	Type of Security	\$ 1,000,000.00 Dollar Amount Sold \$ \$ 1,000,000.00 \$ 1,000,000.00
3.	Attemer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, actor the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question I. Type of Offering Rule 505 Regulation A Rule 304 Total a. Purnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish as estimate and check the box to the left of the estimate.	Type of Security	\$ 1,000,000.00 \$ 20 id \$ 1,000,000.00 \$ 1,000,000.00
3 .	Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, anter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 304 Total a. Purplish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude anounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is	Type of Security	\$ 1,000,000.00 \$ 1,000,000.00 \$ 1,000,000.00 \$ 1,000,000
4	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, anter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 304 Total a. Partish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude anounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs	Type of Becutity Common	\$ 1,000,000.00 Dollar America Sold \$ 1,000,000.00 \$ 1,000,000.00 \$ 4,000.00
4	Attempt also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, anter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 505 Regulation A Rule 304 Total a. Paraish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude argoints relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	Type of Security	\$ 1,000,000.00 Dollar America Sold \$ 1,000,000.00 \$ 1,000,000.00 \$ 4,000.00
4	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 304 or 305, anter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twolve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 305 Regulation A Rule 304 Total a. Famish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish as estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	Type of Security	\$ 1,000,000.00 Dollar America Sold \$ 1,000,000.00 \$ 1,000,000.00 \$ 4,000.00 \$ 15,000.00
4	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 305, anter the information requested for all accurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify accurities by type listed in Part C — Question 1. Type of Offering Rule 305 Regulation A Rule 304 Total a. Purnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude anounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Engineering Fees Engineering Fees	Type of Security	\$ 1,000,000.00 Dollar Amount Sold \$ 1,000,000.00 \$ 1,000,000.00 \$ 1,000.00 \$ 1,000.00 \$ 15,000.00 \$ 10,000.00
4	Answer also in Appendix, Column 4, if filling under ULOE. If this filling is for an offering under Rule 304 or 305, anter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twolve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Offering Rule 305 Regulation A Rule 304 Total a. Famish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish as estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	Type of Security Common	\$ 1,000,000.00 Dollar Amount Sold \$ 1,000,000.00 \$ 1,000,000.00 \$ 4,000.00 \$ 15,000.00 \$ 10,000.00

	and total expenses furnished in response to Part C — proceeds to the issuer."	T 7*%; **T \$86 10 %; \$ 6 % % may make make make make make make make make	3	\$_970,000.00
•	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and If the payments listed must equal the adjusted gros	1	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	***************************************	□ \$	\$ 520,000.00
	Purchase of real estate	***************************************		. 🗆 \$
	Purchase, rental or leasing and installation of madequipment	chinery		
	Construction or leasing of plant buildings and fac			
	Acquisition of other businesses (including the val offering that may be used in exchange for the assissuer pursuant to a merger)	ets or securities of another	□\$. 🗆 \$
	Repayment of indebtedness			
	Working capital			≥ \$ 450,000.0
	Other (specify):			

	Column Totals		711	
	Total Payments Listed (column totals added)		<u> </u>	70,000.00
	中在自己的发展是自己的基本的主义			
g	issuer has duly caused this notice to be signed by the sature constitutes an undertaking by the issuer to fu- information furnished by the issuer to any non-acc	mish to the U.S. Securities and Exchange Commi	ission, upon writte	
SI	er (Print or Type)	Signature	Date	
٧	OS USA, Inc.	Michael Jeffers	10-04-04	
au	ne of Signer (Print or Type) weel Jeffers	Title of Signer (Print or Type) Vice President		

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Is any party described in 17 CFR 230,262 presently subject to any of the disqualification	Yes	No.
provisions of such rule? See Appendix, Column 5, for state response.	Ö	953

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
EVOS USA, inc.	Michael Jeffers	10-04-04
Name (Print or Type)	Title (Print or Type)	
Michael Jeffers	Vice President	

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	Intene to non-s investor	d to sell accredited s in State -Item 1)	Type of security and energate offering price offered in state (Part C-liters 1)	Type of investor and amount purchased in State (Part C-Bern 2)					Disqualification under State ULOB (if yas, attach explanation of waiver granted) (Part E-Item 1)		
State	Уeэ	No		Number of Accredited Investors	Sanoma	Number of Non-Accredited Divertors	Amount	Yes	No		
AL											
AX											
ΑZ											
AR											
CA											
co											
CI											
DE					-						
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,	Intend to non- investor	1 to sell accredited 8 in State 1-Room 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type or amount pu	5 Disqualification under State ULOB (if yes, stitch explanation of waiver granted) (Part E-linen 1)			
State	Yes	No		Number of Accredited Investors	Astount	Number of Non-Accredited Investors	Amount	Yes	No
MO									
MIT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
OH									
ОК									
OR									
PA									
RI									
9C									
81 D									
TN									
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wv						, 222			
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1	to zon-e	i to sell coordined in State l-item 1)	Type of security and aggregate offering price offered in sixte (Part C-Itauz 1)		Type of investor and amount purchased in State (Part C-liens 2)				
State	Ym	No		Number of Accredited Investors	Amonat	Number of Non-Accredited investors	Amount	Yes	No
PR							, , , , , , , , , , , , , , , , , , ,		

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